

Minutes: Board of Education  
Committee on the Standards of Quality  
Date: March 26, 2003  
Location: General Assembly Building, Senate Room B

The agenda included the following presentations:

- Speech-Language Pathology Caseloads
- School Nurse Ratios
- Policy Considerations and Technical Review of the Standards of Quality (SOQ)

Dr. Lissa Power-DeFur provided the following information on speech-language pathology caseloads:

- Speech-language pathologists provide services to children with communication disorders, including language articulation, voice, and fluency.
- Children with communication disorders related to other disabilities such as cerebral palsy, deafness, visual impairment, learning disabilities, emotional disturbance, and autism are also children served by speech-language pathologists.
- Speech-language pathologists are valuable assets to schools striving to address the phonology awareness and language skills that support literacy.
- The high caseloads carried by many speech-language pathologists in Virginia limit their ability to support improved literacy for children with communication disorders and serve as a resource to teachers.
- Caseloads for speech-language pathologists and all other special education caseload and class size standards are included in the SOQ funding formula in the appropriation act.
- The funding level serves as the maximum caseload, which is 68 students.
- The 2003 General Assembly added language to the budget asking the Board of Education to consider caseloads standards for speech-language pathologists as part of its review of the SOQ.
- Numerous public comments have addressed the need to reduce speech-language pathology caseloads for delivery of effective interventions for children.
- In Virginia there is an average caseload of 54 for speech-language pathologists with a range of 19 to 111. Twenty-one school divisions have caseload greater than 68, the mandated maximum.
- There have been persistent shortages in qualified speech-language pathologists in both school and health care settings for many years.
- Speech-language pathologists in schools report that there is a relationship between caseload size and job turnover.
- The number of additional speech language pathologists that would need to be hired statewide if caseloads were lowered to the following values:

	65	60	55	50	45
Additional speech-language pathologists	14.2	23.4	41.6	79.4	157.6

- The caseloads in the majority of school divisions in Virginia are less than the state funding level. Additional funding for any caseload less than 68 is borne by the locality rather than the state, which is an indication that the majority of divisions value lower caseloads.
- Data indicates that the lower caseloads will enable students to progress more rapidly in meeting their special education goals, giving them improved language foundation for mastering the Standards of Learning at an earlier age.
- The board is asked to consider lowering caseloads for speech-language pathologists.

Mrs. Gwen Smith provided the following information on school nurse ratios:

- The primary role of the school nurse is to support student learning and academic success.
- The health needs of students have dramatically changed in recent years. The passage of P.L. 94-142 and Section 504 of the Rehabilitation Act and the more recent passage of the Individuals with Disabilities Education Act have provided access to school for children with chronic and disabling conditions.
- School nurses are perhaps the first and only consistent source of health services for millions of uninsured and underinsured children. Students who are medically fragile and chronically ill are being served in regular educational settings.
- From providing health management of students with asthma, diabetes, and other conditions to tracheostomy care, the school nurse assists in interpreting the child's health needs, recommending safe procedures, and providing direct skilled nursing care.
- Teachers are freed up to devote their time to educating students, and parents are confident their student's health needs and injuries are appropriately handled during the school day through nurse services.
- Section 54.1-3000 of the Code of Virginia requires each practicing nurse to be licensed by the Virginia Board of Nursing. In Virginia, a school nurse may be either a "registered nurse" or a "licensed practical nurse." To practice nursing, a registered nurse must supervise a licensed practical nurse.
- Numerous public comments addressed the need to include school nurses in SOQ minimum staffing requirements. Comments also included support for including school nursing services in the SOQ.
- Important outcomes of school nurse intervention in schools are management of health care for students with chronic illness, decreased accidents at school, improved attendance, academic success, and increased staff knowledge of health issues. Most important, the instructional staff would not have educational time decreased by having to perform nursing procedures.
- There are 821 full-time registered nurse positions and 97 licensed practical nurse positions in Virginia's 132 school divisions and 1,930 schools and centers.
- Currently there are 208 part-time registered nurse positions and 39 part-time licensed practical nurse positions in 132 school divisions and 1,930 schools and centers.

- There are three school divisions with no school nurse services.
- Four school divisions receive limited services from the local health department.
- Seven school divisions receive nursing services through the local health department.
- There is a clear connection between health interventions provided by a school nurse and student academic success.
- School nurses assist students with chronic health conditions to reduce illness related absence and decrease the time teachers spend out of the classroom performing medical procedures.
- Studies have shown that school nurse interventions improve management of chronic conditions, decrease inappropriate visits to the school nurse, decrease absences from school, decrease visits to hospital emergency rooms, decrease accidents in schools, and improve readiness to learn and academic success.
- The board is asked to consider creating a school nurse staffing ratio for school divisions. The school nurse ratio guidelines proposed by the National Association of School Nurses are: one nurse for 750 students in the general school population, one nurse for 225 students in the mainstreamed population, and one nurse for 125 students in the severely chronically ill or disabled population.

Mrs. Anne Wescott reviewed all proposed technical and policy changes to the SOQ. The review consisted of a page by page walk through with the committee of changes made in each standard.

The committee asked for information on the fiscal impact of various options the committee has considered, including:

- An analysis of the fiscal impact of raising the current required instructional positions per 1000 students
- A chart depicting funded positions and prevailing practices
- Information on the cost of lowering caseloads for speech-language pathologists
- An examination of the fiscal impact of requiring reading specialists

The committee plans to meet again on April 7, 2003. The committee plans to devote the majority of the time spent at the Board of Education spring planning session, April 29-May 1, deliberating on proposed revisions to the Standards of Quality.